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A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....MISS HELEN RANDAL, R.N.

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The Study of Ethics in our Schools of Nursing

By ALICE SHEPARD GILMAN

Principal of School of Nursing, Rochester General Hospital

In discussing the study of ethics, it seems wise to first define the term, which, in its broadest sense, may be interpreted "as the ability to choose between right and wrong." There are all sorts of circumstances and conditions which control the motive for the act, and it is an extremely difficult thing to lay down accurately the correct response for each situation which presents itself.

"Ethics" have been formulated and maintained by the character and individuality of the group in the broader social sense. Their origin began with the prehistoric people, who were controlled solely by a brute force issuing from the individual possessing the stronger personality. Slowly it has developed, this code of social ethics, which controls all civilized society of to-day.

The influences which have effected this growth may be first classified under the head of an ideal. From this beginning has evolved the religious ideal, the ideal in regard to self, and, most important, the ideal of democracy, these all being based upon the conception of a state which could best serve human development.

The ideal in regard to self applies itself most readily to the application of ethics in the profession of nursing, as from it emerges the conception of a highly reflective life, its character and responsibility.

We might justly say that ethics are based upon the development of conscience, an established standard by which acts are judged. All individuals are responsible for the standards thus established, as their influence has acted more or less strongly upon the code of ideals.

In teaching nursing ethics, we must first assume that the students went into nursing because they had an ideal—they desired to give to humanity a service which was not in exchange for a mercenary compensation. No organization can flourish unless the individuals who compose it are loyal and steadfast to the code which it is striving to uphold. Therefore, we must get back of the etiquette of nursing, which is being substituted for ethics in many of our schools of nursing to-day, and teach the principle as well as the application.

The analysis of the characteristics, such as personality, sympathy, patience, sincerity, loyalty, reliability, etc., must be carefully studied and their particular application to the nursing profession made, giving emphasis to the necessity of inhibiting the undesirable and developing the important characteristics which make for success—not only to the individual, but to the profession as well.

This is the only way we are going to get the result which will carry out into the community and bear the fruits for which we are seeking. It is not sane to spend hours teaching a lot of professional traditions of conduct to these alert-minded young women unless we can make them realize why it is necessary to maintain the ideals which hold together the nursing profession, and inspire them with the desire to carry on after their diplomas have been granted them.

The real result of ethics shows itself at this time. If it has been real and alive, these women will reach out for better things and aspire to making this the greatest profession on earth.

This is not meant to convey the idea that the teaching of etiquette is unnecessary, but simply that in itself it does not suffice. The motive must be developed which produces the real response, not one which is purely mechanical and superficial.

Unless we can develop permanently those instincts which tend to promote a better understanding of our obligation to society and are permanent in their development, it is more or less hopeless to scratch beneath the surface; but, with added education and an atmosphere which stimulates co-operation and emulation toward the better things, we can develop something stronger than the temporary regard for certain rules and regulations placed around them during their hospital training.

Ethics must be *lived* every day, not taught in a course of eight hours. It is that intangible something which permeates the atmosphere and creeps into our individuality. Its expression is recognized in the life of the school body itself, in the supervisors and graduates through-

out the institution. It breathes of an ideal, an aspiration for better things and higher standards. In other words, the spirit may be differentiated by a concrete example: The beds of the hospital will not be well made because it is inspection day. The patient's nails will not be cleaned because the principal always looks at them. Morning lunches in the wards with internes will not be omitted for fear of interruption from the administration. The motive for the action is changed. Nurses who are truly ethical do a thing, or refrain from doing it, because in their hearts they appreciate the fitness of things and their personal responsibility for their service in life.

I cannot believe we shall get the right results in our schools of nursing, results which are going to permeate, until we come to realize that the big ideal must be awakened and fostered which creates a joy for a dignified, useful service. The whole scheme must be constructive, and our judgments must be made after viewing situations from all sides. Our personalities must not enter in. The administration has got to live with the nurses and not isolate itself in the clouds, dealing out certain disciplinary measures as a response to a certain stimulus of deviation. Military discipline does not develop personality or individuality, nor does it create or maintain ideals which are purely ethical.

To get a real result in maintaining proper etiquette is not difficult, provided this bigger thing is accomplished first. But it only comes by evolution and through the endeavor to improve our schools, both physically and educationally.

THE DAY WELL SPENT

If we sit down at set of sun
And count the things that we have done,
And, counting, find
One self-denying act, one word,
That eased the heart of him who heard;
One glance most kind,
That fell like sunshine where it went,
Then we may count that day well spent.

But if, through all the lifelong day,
We've eased no heart by yea or nay;
If, through it all,
We've done no thing that we can trace,
That brought the sunshine to a face;
No act, most small,
That helped some soul, and nothing cost,
Then count that day as worse than lost.

R. L. STEVENSON.

The University and The Training School for Nurses, Vancouver General Hospital

By MAUDE McLEOD

Superintendent of Nurses, Vancouver General Hospital

The nursing profession of Canada is to-day confronted with many vital questions which may or may not be readily solved, and which will undoubtedly alter present-day methods. All conclusions, however, should be based on how much we can really improve the training which we are giving our nurses to-day.

There have been many changes in our Training School for Nurses of the Vancouver General Hospital, and these have come more or less rapidly, which seems customary in the West; but not, however, before we had given serious thought to all matters in question, and for the following reasons:

Firstly—To improve all conditions which did not seem in the best interests of our training school;

Secondly—To put nursing for this hospital on the highest possible plane;

Thirdly—To secure for nurses in training the keenest stimuli for their best efforts;

Fourthly—To raise the status of our hospital, inasmuch as the criterion of its efficiency is, to a great extent, measured by the standing of our training school for nurses.

Numerous problems presented, and one particularly was the drawing of the training school for nurses closer to the higher educational institutions. Negotiations were opened up with the University, and we recommended to them the following, in brief:

"That a Faculty of Nursing, or Department of Nursing, should be established in the University of British Columbia, with a Dean of Nursing, who should be the Directress of Nursing of the Vancouver General Hospital.

That, on the completion of the requirements as laid down later, a degree should be conferred, the first degree suggested being Bachelor of Nursing.

That provision might be made to grant a degree to graduates on the fulfilment of the requirements as laid down by the University, Nursing Faculty, or the Nursing Department.

That the Department of Nursing keep supervision over the training of nurses in the Vancouver General Hospital.

That hospitals desirous of having their nurses in training participate in this scheme should fulfil the following requirements, as recom-

mended by Miss Johns in a recent report on 'National Standardization of Training Schools':

- (1) A daily average of patients;
- (2) A diversity of service sufficient to give experience in the main branches of nursing, or suitable affiliation with other institutions;
- (3) A proper and adequate provision for the pupil as regards good lodging;
- (4) A trained teaching personnel and supply of teaching material;
- (5) Such regulations of hours off duty as to allow time for theoretical work;
- (6) A standard curriculum;
- (7) A standardized system of training school records;
- (8) Standardized admission requirements;
- (9) Training school inspection by a competent nurse inspector under provincial auspices."

The above, in brief, was the substance of the report as submitted to the University of British Columbia by the Vancouver General Hospital. After lengthy negotiations, and after investigation of conditions elsewhere by the University, the following plan was approved and adopted:

First—That a Department of Nursing be established in connection with the Faculty of Science, leading to a degree.

Second—The admission: Matriculation, or equivalent, at the discretion of the Senate.

Third—University training: two years of Arts. Practical work can be taken in any hospital that comes up to the standard set down by the University authorities, and such hospital will make formal application and submit evidence of fitness.

Fourth—Examinations to be conducted by a board appointed by the Senate; such board shall consist of five members at least.

Fifth—Hospital graduate nurses may be awarded the degree on complying with such conditions as may be laid down by the Senate.

Sixth—That the Medical Council of British Columbia be asked to draw up a standard of qualifications for the guidance of the Senate in reference to proposed hospital requirements.

In regard to the above arrangement, it may be explained that the nature of the degree to be granted has not yet been decided upon. Some consider that the "Bachelor of Science" would be best, whilst others seem to favor the degree of "Bachelor of Science in Nursing"; and, so far as the hospital is concerned, they prefer the latter and have recommended it. However, the details of this matter, as well as many others, will only be settled by the Department of Nursing itself. It will be seen that the nurses desirous of taking the degree must have two years of

Arts, and the admission for such a course is matriculation; but this does not mean that admission to the training school is matriculation, which seems impossible to enact at present, but we trust very shortly that we may be able to demand the matriculation. At present three years' High School, or the equivalent, is acceptable. However, young women who have not matriculation and two years' Arts will not get the degree. Again, hospitals desirous of participating in the scheme must comply with conditions later to be laid down; and this matter at present has been referred to the Medical Council of British Columbia, who will see that some kind of a report or investigation is made of the hospitals, and thus a decision arrived at. We are strongly of the opinion that the conditions, as suggested above, are the best to follow out, and we trust they will be adopted. Nurses, therefore, having their training in other hospitals that are approved, will take their final examination here under the board of examiners as will be appointed.

As stated previously, it is further desirable that all our nursing instruction be put, as much as possible, under the supervision of the Department of Nursing in the University. From this it will readily be seen, therefore, that two nurses holding different standards will graduate from the Hospital Training School; yet it will be arranged that both will have the same practical training course. One will hold a diploma from the Hospital as well as a degree from the University, which degree may be either "Bachelor of Science" or "Bachelor of Science in Nursing," as the case may be. She will thus have put in five years, taking two years' preparatory course in the University and three years' training. Possibly she will go right on from High School to University, right through with her training course. The other will hold a diploma only, from the Hospital, and be an equally well-trained nurse. The first will possibly follow an institutional career and become more or less a leader in her profession, and may take charge of a training school or enter public health or other fields, for which to-day there seems to be a great opening in Canada and the United States. The other, or second nurse, will most likely follow the art of skilled nursing, for which to-day the demand is great for the highly-trained nurse. The University arrangement will be taken advantage of particularly by a number of High School girls who complete their education at about eighteen years, and are desirous of coming in to train, many of whom we have to defer on account of their age, and possibly they wait for two or three years before coming in. Now these young women can continue their studies in the University till they are of age to come in to take the training.

Speaking of the three years' training in the hospital, it has also been recommended that the first six months be spent in practical and theoretical study of a more or less intensive nature, so that the probationer secures a large amount of knowledge, practice and experience before being allowed to do regular nursing service on the ward, and by that time should be well equipped to assume her duties. This does not mean, of course, that she will be excluded from the wards for the first

six months, but she will only be there to receive her practical instruction, which will be carried on more or less by individual teaching through the supervisors and teachers, so as to make it more thorough.

Two years' University or academic work will be equivalent to two years' Arts, and it is recommended that specially arranged courses may be had which will have particularly beneficial bearing on the future technical education to be secured, thus laying a widened, sounder and better foundation for the practical training to follow. Possibly such subjects as English, Psychology, Biology, Chemistry, Physics, Household Economics, Dietetics, etc., may be taught.

This, therefore, is not only a great boon to the nursing profession, but allows the University to extend its service in another direction and enter an extremely useful field, and no doubt this arrangement will have a stimulating effect on all training schools throughout our Province and make them adopt higher standards. The arrangement will come into effect this autumn.

In conclusion, it is quite evident that there are advantages, and these may be summarized as follows:

First—The connection of our training school with the University will bring it to a much higher plane and attract the best type of young women.

Second—The teaching will be more thorough, systematic and efficient—casting no reflection whatsoever on the past, where the teaching was done under many handicaps, and, considering everything, excellently well done.

Third—The great advantage to the patient in not being subjected to the untrained nurse, inasmuch as this system will bring into the wards nurses who are now fairly well qualified to take care of a patient.

Fourth—The connection of the training school with the higher education and in touch with the modern advancements made in knowledge of to-day, which will be more stimulus for the nurses and attract the best class of young women to take the course.

A MENTAL TONIC

"Two people in the dumps" instead of one! A glum nurse and a glum patient! This is the dreary picture drawn by Carrie E. Eppley when, in the *Public Health Nurse*, she insists that a nurse must not be beguiled into the minor key because she has to endure a recitation of a patient's aches and pains. Listen to that recitation she must, as part of her necessary work, but when the tale is ended let her not take the same tone and begin one of her own! Let her rather use her intelligence, find out why her patient is miserable, and endeavor to discover a remedy, so that her own personality and mental balance may prove a beneficial tonic.

"A Drop in the Bucket"

By META L. ANDERSON

"Every one is queer, except thee and me, and thee is a little queer," is a saying which still greets and sometimes discourages the workers who labor with those who are mentally inadequate or incapable of meeting the world's problems. Discouraging, because it is not true—and because thus lightly are the earnest efforts for a more general understanding of the problem met. Understand a problem and the solution is quickly apparent.

For years the institutions for training the feeble-minded worked with their problem and at the same time tried to educate the public to a better understanding of the sub-normal individual, while the public would say "How sad" and go blithely on its way, confidently thinking that all feeble-minded were safely housed in institutions. Not until the public schools began their intensive studies into the why and wherefore of retardation did they, and with them the public, begin to realize that *all* the feeble-minded were not in institutions, but that many, perhaps very many, were here, there, and all over, mingling, and trying to compete with their normal fellows.

After the first shock of learning about the large number of feeble-minded out in the world, the public quickly solved the problem in their own minds by saying that more and larger institutions should be built to house all the feeble-minded at large in the community. Such a programme will probably be necessary in order to care for the anti-social of the mentally defective group, but the fact remains that a greater part of the feeble-minded will leave school to go out into society to make attempts to earn their living—sometimes succeeding and sometimes failing—to marry, and to have children, who, in turn, will leave school to go out into the world to make attempts to earn *their* livings—sometimes succeeding and sometimes failing.

Throughout this country, and especially in the public schools, there has been made, and is being made to-day, a most earnest effort to handle this group and so to train them that some, at least, of the failures may be turned into successes.

Special classes and special schools for this group of children are before the attention of educators to a degree which might appear almost out of proportion to their importance, if one thinks merely of the size of the group and the number of children these schools and classes care for. But who can gainsay that it takes more time, more skill, and a greater degree of expertness to take the waste products of any concern and use them in such a way as to return a profit in the business? And this is even more applicable to the work with these waste products of the schools.

To recount all that the public schools are doing to meet this problem would be only to repeat what the reader of this magazine has heard until he is weary. One hears again and again from prominent school men that if the special classes did nothing but relieve the regular grades of feeble-minded repeaters, they would be worth all they cost. This is a big statement and one which many would challenge. However, nearly all educators will agree that it is a very great waste of precious time in the lives of bright children to have the energy and time of the teacher spent on the defective children in the classroom. This standpoint helped many of us in the beginning of the work when we were very uncertain indeed just how far our efforts to train this waste product of the school would lead. Some of the special schools and special classes stopped there and were quite content to occupy the children who were thus segregated instead of really training them. If you please, then, let us ask you to judge us at least by no worse standard than you would judge a race horse—by its topmost speed. Find the place where the training of defectives has been such that it has meant much not only in the lives of the defectives, but also much in the industrial community into which they have gone, and then decide whether or no the work with defectives has been worth what it has cost.

Our workers are but human, after all, and many of them in their little corners see merely baskets, brushes, benches and tables as results of their work. Others seeking the skies see the immensity of the problem and throw up their hands and quit intensive work with the concrete problem at hand and say "this is only a drop in the bucket, after all."

To keep our vision of the greater field and yet work each day with the concrete problem which is reduced all so slowly, we must constantly bear in mind for what we are training these defective children—and that is nothing less than their place in the world. What is their place in the world? To say again what has been said many times—we can state without fear of contradiction that the defective will not enter the professions; we can say almost without fear of contradiction that he will not enter the skilled trades. The unskilled trades are left. The great, and who can say unimportant, army of "odd jobbers" must be recruited from the ranks of the feeble-minded. If the workers in our special schools and classes understand their problem, they will only give in these classes and schools the work which will train the defective for his life work.

The schools are using gymnasiums, kitchens, shop work and academic work for this purpose, but the workers in the schools must not feel satisfied that they are accomplishing their purpose if they are using this work as an anæsthetic to keep the children quiet for a portion of each day. Colonel Salmon quotes Dr. Miller, in his article on "Shell Shock," as saying: "Shell shock produces a condition which is essentially childish and infantile in its nature. Rest in bed and simple encouragement is not enough to educate a child. Progressive daily

achievement is the only way whereby manhood and self-respect can be gained."

Through progressive daily achievement under skilled instructors lies the only way by which the defective can be salvaged for society. To have used the words "skilled instructors" was almost unnecessary, as it seems practically impossible to get progressive daily achievement under any but skilled instructors. The teacher unskilled in her knowledge of the defective may teach wood work and all the rest of it, and the tables and benches turned out may be as good as those turned out under the skilled worker, but the progressive daily achievement which accomplishes the most toward fitting the defective for his life work is lacking.

There is not one of us who has not been discouraged over and over again, and who has not asked himself if the defective were really worth this endless struggle to find and train workers with this vision and larger comprehension of teaching. Again, a larger view of our work helps us realize that we are merely a part of the greater field of education and that our work well done must contribute to the betterment of the whole field of education; that we are only a part of the work for the social improvement of mankind; with our group lifted, the world is that much better; that our work is only a part of the great effort now being made for a larger and better understanding of all those who are mentally afflicted in any way, and that being properly done it contributes its share to the campaign which concerns itself with the mental health of the nation.—*The Training School Bulletin*.

BURDEN-BEARERS

Burden-bearers are we all,
Great and small.
Burden-sharers be ye all,
Great and small!
Where another shares the load,
Two draw nearer God.
Yet there are burdens we can share with none,
Save God;
And paths remote where we must walk alone
With God;
For lonely burden and for path apart—
Thank God!
If these but serve to bring the burdened heart
To God.

JOHN OXENHAM.

Memorandum on the Carrel Dakin Treatment of Wounds

1. *Preliminary.*

1. Carrel's method of disinfecting wounds aims at rendering the wound germ free within a week or ten days, thus avoiding the dangerous (later) complications of wound infection and making it possible to close the wound by secondary suture.

2. An essential preliminary to complete success of the chemical treatment is the free excision of all infected or devitalized tissue and of all foreign materials.

The mechanical procedure is followed by the introduction into and maintenance in the wound of the hydrochlorite solution in sufficient amount and strength to destroy any organisms present. Inflow of the antiseptic solution into every corner of the wound is the essential factor. For this reason anything in the shape of a through and through drainage "tube" passing across the limb must be avoided, since it would favor direct escape of the solution and nullify the object aimed at.

3. In contact with the tissues the solution soon loses its bactericidal qualities—it must therefore be renewed at hourly or two hourly intervals; to permit of this, rubber tubes, the buried ends of which are closed but provided with minute lateral openings, are carried into every recess of the wound; the open ends are brought out through the dressing and are readily available for instilling the solution by syringe or gravitation.

4. Light gauze packing is employed to keep the wounded surfaces apart and must be changed once in twenty-four hours. Hence there is a daily dressing of wounds in addition to the hourly or two-hourly instillation of solution.

5. Excess of solution is absorbed by cotton wool wrapped round the limb. This is intended to prevent all wetting of the garments or bedding of the patients, a point of importance in relation to transport, especially long journeys by train.

6. Care is requisite in arranging the series of tubes in harmony with the physical configuration of individual wounds, and some ingenuity and experience are called for.

Evolution and Apparatus.

The solution employed is of the hypochlorite of sodium prepared after Dakin's formula. It must be neutral, it should never be warmed or diluted, and should not be kept longer than three weeks.

Rubber tubing is size No. 6 (about 5mm in gross diameter). Each tube is closed by a ligature at one end and is perforated by small lateral openings extending for about two-thirds of the length of the portion inserted into the wounds. The openings made by a punch (which

can be indented for) should be about the size of a small pin's head and sufficiently numerous to allow the solution to escape after the fashion of the nose of a watering-can.

The tubes may be inserted bare and surrounded by the gauze packing, or the perforated portion may be surrounded by bath toweling stitched on. Carrel now employs the latter only for wounds with one depending opening. The towelings serve to retain the fluid which would otherwise escape too rapidly under the influence of gravity.

The petticoated tubes have some advantages in the case of other wounds since either on surfaces or in cavities they are less liable to change their position, a matter of some account when patients are submitted to transport.

The solution may be instilled into the wound by gravitation from an ampoule, or by the application of syringe every two hours or so, 5-10 cc. or in some cases even 20 cc. being injected into each tube. The amount injected into each tube varies according to their number and proximity.

Carrel suspends the ampoule $2\frac{1}{2}$ feet above the level of the bed. A clip on the delivery tube is relaxed every hour or two, according to the degree of infection of the wound. Thus an equable and steady flow is maintained through all the tubes.

The syringe is preferable for all patients liable to be subjected to transport. A Koche syringe is employed. It is advisable either to use long tubes, or attach an additional length of tubing by a glass junction. The ends (closed by one loop of a knot) then project well free from the external dressing, and the injections may be made without disturbing the patient even when asleep at night. In ambulance trains or during transport two syringes should be employed alternately. They should be kept immersed in a vessel of strong antiseptic solution so that each may be subjected to its action before being employed for succeeding patients.

Should the skin show signs of irritation by the solution, it is to be protected by strips of lint previously impregnated with malted vaseline. These should be applied to the skin along with the depended edge, or all around the wound.

The outside dressing consists of several layers of gauze wrung out of the antiseptic solution, and a layer of sterilized cotton wool perforated to allow of the passage of the instillation tubes to the surface.

The Steps of Treatment.

1. Treatment should be begun as soon as possible, if the maximum of success is to be obtained within twelve, and not later than twenty-four hours after receipt of the wound.

2. Treatment commences, under an anæsthetic if necessary, by excision of the wound surface. All devitalized and infected tissues and all foreign materials are removed. Additional incisions are made if

necessary to give access to tunnels or pockets. In making the latter, regard must be had to the principle that directly dependent openings allow too free escape of instilled fluid, hence these should be avoided if possible and in any case be limited in extent. Arrest of all hæmorrhage is of the first importance. Infiltrated blood forms an important factor in the spread of further infection, while blood collecting in the existing cavity clogs the meshes of the gauze and blocks the openings in the instillation tubes, interfering with proper diffusion and retention of the antiseptic solution. It is a wise precaution in all cases to give an early instillation to wash out any clots which may be obstructing the small openings in the tubes. Too great care cannot be taken during the operative part of the procedure to prevent the access of additional infection. When a wound at the end of twelve or twenty-four hours already presents signs of very acute infection, such as reddening of the surrounding skin and very foul-smelling discharge, excision should not be performed, but the surgeon should content himself with providing a sufficiently free exit opening to prevent retention of discharge. Under such conditions excision provides merely a now enlarged surface for absorption and further general infection, while the attempt at mechanical cleansing is a failure. At the most only ragged dead tissues should be removed.

3. *Insertion of the Tubes.*

(A) *In a surface wound.* A single layer of gauze is laid on the raw surface, a rubber tube is then applied in the long side axis of the wound; then, the usual wet gauze and cotton wool dressing. The tube is fixed in position by a safety pin or strip of plaster.

(B) *In a wound with a cavity or recess.* Two or more tubes are inserted to the bottom of the cavity and light gauze packing is introduced to keep the raw surfaces apart. In very deep wounds where it would be difficult to remove or reintroduce the gauze, portions of rubber tube of large calibre are employed for the same purpose. Gauze that has imbibed blood or thick discharge must be replaced, as it prevents access of the solution to the tissues.

(C) In a wound that has a dependent opening through which the solution would escape at once as a result of gravity, a toweled tube must be employed. Similarly, in a tubular wound across a limb, toweling must be applied around the rubber tube. Lint may often advantageously be substituted for gauze; it holds the distributed solution better.

4. *Secondary Closure of Wounds.*

If the progress of disinfection be controlled by examination of smears taken from various parts of the wound, say every third day on the occasion of the wound being dressed, a rapid diminution in the number of microbes present will be noted. When in every field examined not more than one micro-organism is discovered, the wound is sufficiently germ free to be successfully closed. This should be from

the sixth day onwards in simple flesh wounds, and from the fifteenth day onwards in severe compound fractures.

Closure is effected by silkworm gut sutures, Michel's clips, or strapping. The approximation of large gaping wounds is facilitated by the primary use of the "corset," *i.e.*, strapping, to the proximal end of which stay hooks have been fastened, is applied to either margin of the wound. The wound is then laced across with thin rubber cords.

In small surface wounds and those of a minor character it is not necessary that the whole technique described above should be adhered to. In such a proper mechanical and chemical disinfection of the wound may be followed by the application of a moist dressing soaked in Dakin's solution of Eusol. This remark is made simply with a view to lightening the labor of dealing with the numerous patients during transport and to allow of the attention of the medical officers being concentrated on the patients more seriously wounded.

Dakin's Solution.

Preparation of the Solution of Sodium Hypochlorite.

To prepare 10 litres of solution weigh out accurately:

- X. Chloride of lime (bleaching powder) 200 grammes
- Dry carbonate of sodium (prepared by Solvay process).....100 grammes
- Bicarbonate of sodium 80 grammes

2. In a 12 litre flask place 5 litres of ordinary water (tap water), and the 200 grammes of chloride of lime; shake hard two or three times at intervals, and leave in contact for the night.

3. Dissolve the carbonate and bicarbonate of sodium in 5 litres of ordinary cold water.

4. Pour all at once the solution of the sodium salts into the flask containing the maceration of chloride of lime. Shake it hard for a minute, and let it remain quiet to enable the carbonate of calcium to settle.

5. At the end of half an hour syphon off the supernatant liquid and filter it to obtain a clear product. It must be kept sheltered from the light.

The antiseptic solution is then ready for use. It contains about 50 per cent. of hypochlorite of sodium with small amounts of neutral sodium salts. It is isotonic to human blood and should respond to the following test, which must be carried out exactly as directed.

Test. Pour about 20 c.c. of the solution into a glass and let fall on the surface of the fluid a few centigrammes of powdered phenolphthalein. Agitate the whole with a circular movement as if rinsing the glass. The liquid should remain colorless. A more or less intense red color would show the presence of a notable quantity of free or incom-

pletely carbonized alkali which is to be ascribed to a fault in the technique.

Titration of the Solution.

Measure out 10 c.c. of the solution, add 10 c.c. of distilled water, 2 grammes of potassium iodide, and 2 c.c. of acetic acid. Pour into the mixture a decinormal solution (2.48) of sodium hyposulphite, until it is discolored. Let N be the number of c.c. of hyposulphite employed. The titre in hypochlorite of sodium for 100 c.c. of the liquor will be given by the equation:

$$T) = N. \times 0.03725.$$

Dangers to Avoid.

Never heat the solutions.

If in a case of urgency you are forced to resort to the trituration of the chloride of lime in a mortar, carry this out with water alone, never with the solution of sodium salts.

X must have 25 per cent. active chlorine.—*The News Letter.*

What Has Been Accomplished by the Committee on National Nursing Service

The Committee on National Nursing Service sympathizes with the statement of one of the officers of the Red Cross Society, that "the process of formulating a policy for a Dominion-wide organization which is swinging from war service to peace service is slow and difficult."

Those who were present at the annual convention in Vancouver will remember that a representative committee was given power to act with the Red Cross Society, the St. John Ambulance and the St. John Ambulance Brigade in formulating a policy for a national nursing service. This committee consists of the presidents and secretaries of the Canadian National Association of Trained Nurses and the Canadian Association of Nursing Education, the chairman of the public health section, and the presidents of the provincial associations. Changes in the provincial officers have made a changing committee. The committee decided that it would be necessary, for the transaction of business and for the holding of conferences which might take place in Ottawa or in Toronto from time to time, that a sub-committee, with its own secretary, should be appointed. Miss Gunn, Miss Flaws, Miss Dickson, Miss Jamieson and Miss Dyke were appointed to act on this sub-committee. At the first meeting Miss Potts and Mrs. Hannington were added, and Miss Gunn and Miss Dyke appointed chairman and secretary.

Three meetings of the sub-committee have been held and the minutes and correspondence forwarded to all members of the committee.

Following the meeting in Winnipeg of the council of the Red Cross Society, a conference was held between Mesdames Plumptre, Speechly

and MacWilliams, acting for the Red Cross Society, and Misses Caruthers and Johns, of our own committee. Miss Johns reports, regarding this conference, that they discussed the various phases of the problem, especially those affecting the Western provinces, and were encouraged by the lively interest shown by the Red Cross Council.

It has not yet been possible to arrange a conference with the St. John Ambulance Association and the St. John Ambulance Brigade.

The recommendations of the Canadian National Association of Trained Nurses, approved at the annual convention, were forwarded, with some changes in form, to the Council of the Red Cross Society for consideration at their annual meeting in Winnipeg, September 9th. These recommendations are in the hands of the provincial presidents.

The reply received from the honorary secretary, Mrs. H. P. Plumptre, is as follows:

"The memorandum submitted by the Canadian Association of Trained Nurses was placed before the Central Council of the Canadian Red Cross Society, and sent back for consideration and report to the special committee on nursing. This committee met twice during the session of the Council and very carefully considered the nurses' memorandum.

"The action taken by the Council is on somewhat wider lines than that suggested by the nurses, as it is intended to include both doctors and nurses and voluntary workers and semi-trained nurses. The Council authorized the policy of the formation of a Red Cross Emergency Medical and Nursing Service, and resolved to form a committee, upon which representatives of organizations interested should be asked to serve. This does not conflict with the request of the nurses for a registration of nurses, which would come under the scheme of a general Nursing and Medical Service.

"The Council also adopted the nurses' suggestion of getting into touch with the various universities of the country and pressing the claims of the nurses on their attention, and a letter to that effect has gone to every provincial university, and the provincial branches of the Red Cross Society have been notified to be prepared to take up this matter with their own universities.

"The Council referred further action with regard to this Medical and Nursing Service to the Central Executive, which, at its last meeting, reappointed General Ryerson and myself to carry on the work of outlining the organization and policy of such a service."

The development of a National Nursing Service scheme will therefore follow the formation of a special committee to be appointed by the Red Cross Society. It is essential, for the successful co-operation of the two organizations, that committees appointed by the Canadian Red Cross Society to deal with nursing service should consist of representative nurses.

EUNICE H. DYKE,

Secretary Committee on National Nursing Service.

The Canadian National Conference on Education in Relation to Citizenship

By JEAN E. BROWNE

Substituting for Miss Johns as Delegate

It will be remembered by most of the members that, at the annual meeting in Vancouver, the Canadian National Association of Trained Nurses decided to send a delegate to the above conference. Miss Johns was appointed to serve as delegate; but, as Miss Johns had left Winnipeg, Miss Jean Browne was appointed to serve in her place. Miss Browne's report of the conference follows:

Madam President:

I beg to submit the following brief report of the Canadian National Conference on Character Education in Relation to Citizenship, held in Winnipeg on October 20, 21 and 22. It was arranged to have the proceedings printed and distributed among the delegates at an early date following the conference; hence your delegate did not take copious notes. I shall forward the printed proceedings to you as soon as I receive them.

All resolutions presented at the conference went into the hands of the Resolutions Committee. Some liberties were taken with the wording of our resolutions, but they were passed by the conference. I am attaching the newspaper clipping to indicate the form in which they were passed. The chief speaker to the resolutions was Dr. Hugh Dobson, secretary of the Social Council of the Methodist Church in Canada. In a three-minute address he pointed out that health inspection of school children could be most successfully carried out through the medium of specially-trained school nurses, and spoke of one province in Canada, which he had recently visited, that was about to change its medical inspection of schools to health inspection by school nurses.

Resolutions submitted:

"That immigrants having non-British names be required to change their spelling or adopt new names in order that none might know their original origin."

"That health inspection be extended to all school children of the Dominion, and teachers in training be given special health courses to facilitate this work—Canadian Association of Trained Nurses."

"That a Canadian Citizens' Educational Association be formed, with executive officers and membership fee, to perpetuate the work begun in the conference."

"That a Bureau of Education be established similar to the one outlined in the Smith-Towner bill in the United States."

The speakers at the conference, other than Canadians, were Dr. Soares, of Chicago University; Dr. Suzzalo, president of the University of Washington, and the inimitable Peter Wright.

Dr. Soares defined the educated person as the person who can respond efficiently to every social situation in which he finds himself. He instanced the cases of the little girl helping her mother wash dishes; of the man who was the head of the corporation willing to join a conference with his employees; of the man who filled in his income tax schedule not because the Government made him do it, but because he was anxious to do his part in bearing taxation. The aim of education was progressively to produce that sort of person, and it failed utterly if it failed in that one thing. He pointed out the fallacy of the old conception of the purpose of education—that is, to fit the child to live his adult life. He emphasized the fact that childhood is as complete a stage in existence as adult life is, and that the purpose of education is to secure the maximum of development for each particular stage in life.

Dr. Suzzalo spoke on democracy. He strikes one as a man who is devoting all the resources of a great mind to making the world a better place to live in. He is an idealist who is putting the ideals into practice. As if to demonstrate present-day democracy in Canada, this finished scholar, the president of a great university, was followed by Peter Wright, the labor leader, who could not read or write at sixteen years of age. Never before have I seen an audience respond to a speaker as that audience did to Peter Wright. Near the beginning of his address he said something to this effect: "I've heard a great deal about morals since coming here, but I've heard mighty little about the kids themselves. Let me tell you, you can't teach morals to hungry kids—and there are more of them in the world than you know anything about."

Among our Canadian speakers, one must mention Dr. Helen MacMurchy, whose address was so much appreciated by every one, and who is known and loved throughout Canada by all the members of our profession.

The one great discussion of the conference centred around the formation of a Bureau of Education. The motion was to the effect that a Bureau of Education be created by the Dominion Government on somewhat similar lines to the Bureau of Education at Washington. The amendment to the motion was that a Department of Education be created at Ottawa, with a Cabinet Minister in charge. The almost universal exception taken to this was that a department of this kind would bring education into the field of politics. The much-discussed amendment to the amendment was that a bureau for the purpose of carrying on research work and conducting surveys, etc., be organized by the council elected at the conference, and that the Dominion Government be asked to help finance it by making liberal grants. The amendment to the amendment was finally passed.

The treasurer of the original committee made an announcement that the Council would start out with funds amounting to approximately \$25,000. This amount and the expenses in connection with the conference have been raised in the most part by the Rotary clubs, although some very liberal individual donations have also been given.

One of the important features of the conference was the electing of a council of fifty members to conduct the business of the conference for the next three years. For this purpose the delegates divided up into provincial groups, each province having power to name four delegates. The thirty-six thus chosen then had power to add to their number fourteen more. Your delegate had the honor of being appointed on this council as one of the four representatives from Saskatchewan. It was agreed that there should be at least one woman from each province on the council, so that, out of the nine women on the council, one belongs to the nursing profession.

The personnel of the National Council, as nominated by the provincial delegates and elected by the conference, were as follows:

British Columbia—Principal W. H. Vance, Vancouver; H. Charlesworth, Victoria; W. H. Leckie, Vancouver; Mrs. M. L. Boyle, Vancouver.

Alberta—Mrs. L. C. McKinney, M. L. A., Claresholm; W. G. Carpenter, B. A., superintendent of schools, Edmonton; H. W. Wood, president United Farmers of Alberta, Calgary; J. T. Collisson, member Separate School Board, Edmonton.

Saskatchewan—Dr. Snell; Mr. Hamilton; J. F. Bryant; Miss Jean Browne.

Manitoba—W. H. Bulman, Winnipeg; Dr. D. McIntyre, Winnipeg; Prof. W. F. Osborne, Winnipeg; Rev. Dr. E. Leslie Pidgeon, Winnipeg.

Ontario—Hon. Dr. Cody; Prof. H. T. J. Coleman, Kingston; Thomas Moore; Dr. Helen MacMurchy.

Nova Scotia—Dr. Slocan, Truro; Mrs. Sexton, Halifax; C. J. Buchell, Halifax; Rev. Dr. Tompkins, Antigonish.

New Brunswick—Rt. Rev. Bishop Richardson, Fredericton; Inspector Peacock, Fredericton; ex-Governor Josiah Wood, Sackville; Mrs. James F. Robertson, St. John.

Quebec—Hon. Athanase David, Montreal; Hon. Cyrille F. Delage, Quebec; Howard Murray, Montreal; Dr. G. W. Parmalee, Quebec.

Prince Edward Island—Dr. McLellan, rector of St. Dunstan's College; Dr. S. N. Robertson, principal Prince of Wales' College; J. O. Hyndman, Charlottetown; Miss Carrie Ellen Holman, Summerside.

The original convening committee will retain its identity until their books are audited. They are also to prepare agenda for the meeting of the Council in Ottawa. If there is anything in the nature of the agenda which the Canadian National Association of Trained Nurses wishes to have brought up, I should be glad to present it at the meeting of the full Council in Ottawa.

Life isn't in holding a good hand, but in playing a poor hand well.
—ANONYMOUS.

Clubs in the Training Schools

By GRACE E. FAIRLEY

I feel that, with so much of importance to be decided, anything I could say on the subject of "Clubs in the Training School" would encroach on too much valuable time, even to the extent of five minutes, as you request; but that some type of club or organization which would help to develop the pupils' interests outside of, and beyond, purely hospital matters, is necessary, is certainly most apparent.

It is not till the average nurse begins to take an active part in the affairs of her *Alumnæ*, or other nursing organizations, that she realizes how handicapped she is in parliamentary procedure, or in handling her subject, or how unnecessarily nervous she finds herself.

All this, or much of it, at least, might be avoided if, in a social way, meetings or lectures and discussions, on some other subjects than hospital work, were more common during the pupils' training.

At the Hamilton General Hospital the board pays the fees of the pupils to become members of the Hamilton Scientific Association, which each winter has put on a very good programme of social, industrial, political and educational lectures. These lectures are not held in the hospital, which means, in the first place, that the nurses are right away from hospital atmosphere; especially so, as 75 per cent. of the membership is made up of lay people, so that the speaker's standpoint is quite dissociated from hospital. The lectures are usually keen, and, at the termination, a round-table discussion takes place, which accustoms the members to speak in a very informal way. Unfortunately, it had to be made compulsory for the nurses to attend, as, when it was optional, very few seemed sufficiently interested to attend. I mention this to show the lack of interest displayed by the average nurse in anything outside her daily work; and it was quite noticeable, after they had attended a few successive lectures, how much more interested they became.

If the shorter day comes into force, it is to be sincerely hoped that something of a broadening influence will be introduced into the pupils' life to fit her to discuss intelligently the many problems which will crop up later; and it would seem that a social and political club in the training school (or, in the case of smaller schools, to join some such local association) would meet the want.

He who sows courtesy reaps friendship, and he who plants kindness gathers love.—BASIL.

If you want knowledge, you must toil for it; and if pleasure, you must toil for it. Toil is the law. Pleasure comes through toil, and not by self-indulgence and indolence. When one gets to love work, his life is a happy one.—JOHN RUSKIN.

Editorial



It would seem that all nurses in Canada feel that some real memorial should be made for those of our Canadian nursing sisters who gave up their lives for their country in the great war. Different ideas are given informally to us all from time to time; but it would appear that we must do better than that if anything of value is accomplished. Could not each association affiliated with the national nursing organizations take up this as part of the winter's work, bearing in mind that it is a national memorial for all sections of the country? Nothing local or provincial should be considered, and something of much more value than the mere erecting of a brass or marble monument. It would seem fitting that it should be something educational: some form of help, perhaps, to the student who wishes to have, but cannot afford, extra study or development. Will those interested (and who will not be?) bring the question to the meeting of their association and ask that the result be put into form and brought to the editor's notice, that the various plans may be put into the magazine, and probably at the next convention all delegates will have become familiar with the different opinions and be ready to adopt a memorial which will meet with the favor of the majority of our nurses. Any letters on this point will be gladly printed, and will help towards this end. It must be one national scheme in order to be truly fitting to those who came from all parts of our wide land at the call.

TIRED NATURE'S SWEET RESTORER—BALMY SLEEP

He—like the world—
His ready visit pays
When fortune smiles,
The wretched he forsakes.
Swift on his downy pinions
Flees from woe
And lights on lids
Unsullied with a tear.

Horace Smith, author of "Rejected Addresses," when his daughter was being christened, was asked by the clergyman the name of the child. "Rosalind," said the father. "Rosalind?" was the reply. "I never heard such a name; how do you spell it?" "Oh," was the rejoinder, "As you like it."

Victorian Order of Nurses



A Post Graduate Course of four months in District and Public Health Nursing for graduate nurses is given at the training centres of the Order, namely: Ottawa, Montreal, Toronto and Vancouver.

Salaries during the course and good openings after successful termination.

For full information, apply to the Chief Superintendent, Room 4, Holbrook Chambers, 104 Sparks Street, Ottawa, Ont.

HOSPITALS AND PUBLIC HEALTH

Every year sees a larger proportion of sick folk going to hospital for examination and treatment. Formerly only the very sick were sent to the hospital; now many people ordinarily sick go there to be treated. They do this because it is more economical for them to do so, and because their chances of recovery are greater than though they remained at home. In the modern large hospital nowadays the patient has the advantage of being subject to an examination when necessary, not only by the special medical man under whose care he is placed, but also by the radiologist (X-ray man), the special-sense specialist, the laboratory investigators; and may receive not only the immediate ordinary medical or surgical treatment (as the case may be), but also such special forms of treatment as may be required, viz., hydrotherapy, electricity, X-ray, massage, mechano-therapy, occupation therapy and the like.

As our experience increases, we find that the earlier the disease is diagnosed the better chance there is for recovery. So it would seem advisable that ailing persons should come under medical surveillance at as early a date as possible, and receive the ounce of early treatment which may mean more than many pounds of late treatment. To consummate this desirable condition of affairs, it would be well for all our hospitals to establish diagnostic clinics to which any general practitioner might send (or, better, accompany) his ailing patient, to receive the advantage of a synthetic study of the case. We dare say, when this end has been accomplished, the next step will be to have a periodical examination of anyone—well or ill—at such a clinic, to ascertain if he is in proper physical condition to perform the duties of life.

—*The Hospital World.*



The Canadian Nurses' Association and Register for Graduate Nurses, Montreal

President—Miss Phillips, 750 St. Urbain Street.

First Vice-President—Miss Amy Desbrisay, 638A Dorchester St., West.

Second Vice-President—Miss H. M. Dunlop, 209 Stanley Street.

Secretary-Treasurer—Miss S. Wilson, 638A Dorchester St., West.

Registrar—Mrs. Burch, 175 Mansfield Street.

The annual meeting was held in the club room on Tuesday afternoon, October 7th, at three o'clock.

After the election of officers and the transaction of business, Col. the Rev. Canon Almond gave a very interesting and stirring address to the nurses on "What We Can Do in the Present Crisis."

Refreshments, the gift of Mr. Morrice, of the General Hospital, were served.

The following report of the year's work was read by Miss Wilson, the secretary-treasurer:

To the President, Committee and Members of the Canadian Nurses' Association:

Our twenty-fourth year has just closed, and an exceedingly busy one it has been for our registering members. Although fifty of our nurses have failed to register this year, new members have taken their places, and to-day we have forty-eight more members than we had in October of last year: Three hundred registering nurses, forty-two full members without register, nineteen associate members, nineteen non-resident members, or a total of four hundred members.

During the Spanish flu epidemic in October we simply could not supply the unusual demand for nurses, although our two hundred and ninety-four nurses did splendid work, many of them continuing until they were patients themselves; and ever since that time there has been so much sickness that the demand for nurses is still great. Many of our nurses lost relatives and friends from flu, and our sympathy is extended to them all.

We regret to have to record the death of the five following members, either from flu or its effects:

Miss McClurg, Montreal Maternity Hospital and Maternity Hos-

pital, England. (Miss McClurg was elected a member of the executive committee at the annual meeting last October.)

Miss Teresa Dow, Bridgeport General Hospital, Bridgeport, Conn.

Miss Helen Gorman, Children's Memorial and Allied Hospitals.

Miss Marguerite Watts, Montreal General Hospital.

Mrs. Mundie (formerly Miss Maude Stevenson), Toronto Hospital for Sick Children.

Also Mrs. Cushing (formerly Miss Barnard), from tuberculosis. Before her marriage, Mrs. Cushing was superintendent of the Children's Memorial Hospital.

Resolutions of sympathy were extended to the families of the deceased nurses.

In November, as the ban on public meetings had not been lifted, our lecture was postponed; and in December only a social evening was held as a farewell to Miss Fairley, our first vice-president, who has gone to Hamilton, Ontario, as superintendent of the General Hospital in that city. Miss Fairley has been much missed by the association and her friends. She was succeeded as superintendent of the Alexandra Hospital by her assistant, Miss Cutforth.

At the February meeting the president brought up the question as to the advisability of enrolling on our register undergraduate nurses, with the object of controlling their charges for service. A general discussion of the subject followed, but no decision was reached.

In connection with the March meeting, the president expressed her regret that reports had reached her to the effect that, during the flu epidemic, where a few of the nurses attended more than one patient in a house, they had overcharged for their services. In order to prevent a recurrence of this, a notice of motion was given by Miss Welch, seconded by Miss Hill, that the clause on the tariff card which reads, "for each additional patient in one house a half fee is charged," be altered to read, "one additional half fee only may be charged for extra patients in the same house."

In April Miss Phillips, our president, was called home by the sickness and death of her mother. Miss Phillips has the sympathy of the members of the association.

At the May meeting the president requested that the notice of motion given by Miss Welch on March 4th be read. A vote on its adoption was taken and unanimously carried, the amendment of the clause spoken of to become effective at once.

At the same meeting it was decided to hold a memorial service for the association nurses who lost their lives by the sinking of the transport ship Llandoverly Castle, and also for all nurses who had lost their lives during the war, the service to be held on the evening of Sunday, June 8th, in the Church of St. James the Apostle, the preacher to be Major the Rev. Canon Stratford.

Several of our nurses attended the convention of the Canadian National Association of Trained Nurses held in Vancouver, this association being represented by Miss Birch, of the Western Hospital.

There has been a good deal of sickness amongst our members during the year, and six deaths already mentioned; also, many deaths have occurred in the families of the committee and members. In all cases where this was known, letters of sympathy were sent from the association.

The sympathy of the association is extended to our registrar, Mrs. Burch, in the death of her sister, Miss Bacon. Miss Bacon was always a friend to the nurses, and took a great interest in their work.

The lectures during the winter were much enjoyed and well attended, considering that the nurses were so busily engaged. They were as follows:

January—Rev. Dr. Pedley, "The Life of the ex-Kaiser."

February—Dr. M. L. Ship, "Diet, in Sickness and in Health."

March—Lieut.-Col. W. G. Turner, M. C. M. D., "War Reminiscences."

April—Dr. H. L. Reddy, "The Auto-toxemia of Pregnancy."

May—Dr. B. A. Conroy, "Medical School Inspection."

Miss Louise Stewart, convener of the Mothers' Friendly Club, Griffintown, reports a good year, and will tell of the work done in her report. In April the club was entertained by the C. N. A. at the club room, where a very pleasant evening was spent.

During the winter the Edith Cavell Chapter of the I. O. D. E. have held their monthly business meetings in the C. N. A. club room.

Our members are gradually returning from overseas, and we are glad to welcome them back.

I take this opportunity of thanking the president, the committee, the registrar and the members for the many kindnesses shown me during my second year as secretary-treasurer of the association.

SUSIE WILSON, Secretary-Treasurer.

Miss Cole, M.G.H., 1913, has gone to be lady superintendent of the Sherbrooke Hospital; Miss Barwick, M.G.H., 1916, to take charge of the operating-room. They both entered on their duties on October 1st.

We are glad to welcome Miss Moffatt among us again after a three months' absence at Ballston Spa, N. Y.

Industry is, in itself and when properly chosen, delightful and profitable to the worker; and when your toil has been a pleasure, you have not earned money merely, but money, health, delight and moral profit, all in one.—R. L. STEVENSON.

News from The Medical World

BY ELIZABETH ROBINSON SCOVIL



STOPPING SEVERE HICCOUGH

A severe case of prolonged hiccough was stopped by compressing the diaphragm. The patient lay on his back, bent the legs, and then flexed the thighs to the extreme on the abdomen. The pressure pushed the contents of the abdomen up against the diaphragm. The position should be kept for ten minutes at least, or until the spasm of the diaphragm relaxes. Another method of relaxing it is to distend the stomach with gas. This is generated by swallowing a mixture of 5 gm. each of citric acid and sodium bicarbonate.

EARLY SPECTACLES

There is historical evidence that lenses were used by old persons to distinguish small print as early as 1260 in China. They are said to have been known in India at the end of the 12th century. On a tombstone in a church in Florence is the inscription, "Here lies Salvino d'Armati, of Florence, the inventor of spectacles. God forgive him his sins. Died in the year of our Lord 1317." The earliest known pair of spectacles are on exhibition in the museum at Nuremburg. They consist of two large circular lenses, and belonged to Willibald Pirkheimer, 1470-1530.

HOME CANNING

In an investigation following the death of several persons from eating asparagus canned at home, it was stated that death was due to the presence of a strain of *B. botulinus*, which had spoiled the asparagus. Extreme care and cleanliness in all home canning was recommended. Tight-fitting tops for the bottles and new rubbers are essential. The food to be canned must be in perfect condition, the water pure, and the process carefully carried out. Finally, when the can, or jar, is opened, if there is the slightest disagreeable odor, or any sign that the food has not kept perfectly, it should be rejected. One woman died from eating two teaspoonfuls of spoiled canned corn.

EFFECT OF HUNGER ON THE GERMANS

A German doctor says a rather important factor is the effect of hunger on the moral qualities. The entire population is suffering from the effects of the food situation. I have been able to observe this among my assistants at the university. Their efficiency, both mental and physical, has decreased. Their mood is one of deep depression, lack of inclination to work and lack of energy.

REMEDYING WEAK ADHESIVE PLASTER

A writer in the *Journal of the American Medical Association* had to use adhesive plaster that would not stick properly. He took common rubber cement, such as is used for patching tires, diluted it with about ten parts of ether, and painted the skin where the plaster was to be applied. After the skin was cleaned and dried the plaster was put on, adhered immediately and remained adherent for a long time. If the secretions were profuse the outside of the plaster was painted with the same rubber solution to make it waterproof. The solution was also used instead of iodine in preparing the skin for operation, with satisfactory results.

STATE CARE OF THE TEETH

An earnest effort is being made in Denmark to combat caries of the teeth. Scarcely 2 per cent. of the children have sound teeth, and 40 per cent. of the teeth of adults are affected. Propaganda to teach the care of the teeth and the evil of caries is being carried on. School and community dental clinics are recommended and the inclusion of dentistry in the provision of health insurance. Similar work is much needed in Canada.

OVERFEEDING IN TUBERCULOSIS

A medical writer thinks that the tendency is to overfeed in cases of tuberculosis. Lunches between meals should not be given, except under unusual conditions. Three substantial meals a day, he considers, gives better results.

COMBATING VENEREAL DISEASE

The Canadian National Council for combating venereal disease has recently been organized. Some of the means advocated are to assist the dissemination of a sound knowledge of the physiologic and moral laws of life, in order to raise the standard both of health and conduct; to co-operate with existing associations; to give advice when desired in order to provide the social measures which are basic in the solution of this problem; to promote suitable legislation; to provide accurate and enlightened information as to the prevalence of these diseases and the necessity of their early treatment; to promote the facilities for early treatment, and to increase the opportunities of medical students, doctors and trained nurses for the study of these diseases.

Life is full of despondency and misfortune, but one touch of humor makes the whole world grin.

The latest gospel in this world is, know thy work and do it
know what thou canst work at, and work at it like a Hercules.

THOMAS CARLYLE.

Public Health Nursing Department

*Conducted by the Committee on Public Health Nursing of the C. N. A.
Under the Convener on Public Health Nursing*



"Give me intelligent motherhood and good prenatal conditions, and I have no doubt of the future of this or any other nation."

RT. HON. JOHN BURNS.

AN ODE TO HEALTH

Health in itself makes life a perpetual joy.

Nothing daunts, nothing over-awes, nothing discourages, and nothing overpowers the man and woman possessed of health.

Health means not only vigor and energy of the body, but also clarity and strength of mind, purity of body and of soul.

The healthy person dominates life, instead of allowing life to dominate him.

He scarcely thinks of his body as consisting of parts, or as performing separate functions. To him the body is but one harmonious whole.

He is a unit, a being, a man; complete, vigorous, perfect.

To such a man work is joy. He regards obstacles as but opportunities for testing his strength. He hardly knows what weakness is. He never experiences exhaustion. Merely to grasp his hand is a pleasure. To gaze into his eyes is a joy. To hear his voice is to feel a thrill pass over one. To peer into his mind serves as a stimulus to higher achievements.

Health supplies the courage, the aggressiveness in life. Without health one is bankrupt, regardless of what his financial capacity may be. He becomes a cipher in the world of real men and women.

If you have health, then, friends, cherish it, guard it and treasure it as you treasure life, for out of it are the issues of life.

Men and women enjoying perfect health do not analyze their feelings like this. They take it for granted that everyone feels the same as they do, little dreaming that to the vast majority this Ode is but a dream. And yet it is a just analysis of the feelings of those who enjoy good health. In other words, the healthy know not that they are healthy.

The foregoing Ode simply conveys the sentiments of the thinking

people of all ages, including statesmen who have vision and who have at heart the welfare and destinies of the race.

It was with an intelligent appreciation of the facts set forth in this Ode that Lord Beaconsfield, nearly three-quarters of a century ago, said: "Public health is the foundation on which rests the happiness of the people and the strength of the nation," and that was why he said that "the first duty of a statesman is the care of the public health."

Unfortunately, there have only been a sprinkling of statesmen in all ages who have had a vision like this, in consequence of which it has apparently required a calamity such as that from which we have just emerged to arouse those responsible to a sense of their duty in safeguarding their most valuable national asset.

THE NURSE

The world grows better 'year by year
Because some nurse, in her little sphere,
Puts on her apron, grins and sings,
And keeps on doing the same old things:
Taking the temps., giving the pills
To remedy mankind's numerous ills;
Feeding the baby, answering bells,
Being polite with a heart that rebels;
Longing for home, and all the while
Wearing the old professional smile;
Blessing the new-born babe's first breath,
Closing the eyes that are still in death;
Taking the blame for the doctor's mistakes—
Oh, dear! what a lot of patience it takes!
Going off duty at seven o'clock,
Tired, discouraged, just ready to drop;
But called back on "special" at seven-fifteen,
With woe in her heart, but it must not be seen;
Morning and evening, noon and night,
Just doing it over, hoping it's right.
When we lay down our caps and "cross the bar,"
Oh, Lord, will you give us just one little star
To wear in our crown, with the uniform new,
In that great Ward above, where the Head Nurse is You?

Trifles make perfection, but perfection is no trifle.—ANGELO.

Taking things as they come does not wear one out so fast as dodging them.—ANONYMOUS.

The Diet Kitchen

By ELIZABETH ROBINSON SCOVIL



Florence Nightingale once said nurses should remember that mincing tough meat only made it tougher. She probably had in mind the British "hash"—a dish much in vogue in her day, cubes of meat about half an inch square, laboriously cut by hand with a chopping-knife in a chopping-tray, or on a chopping-board. She was not familiar with the modern mincer, which divides the tough fibres so skilfully and into such minute portions that there is no semblance of toughness left in them. The nurse, who often has to deal with most unpromising materials in evolving dainty dishes for her convalescent patient, should fully recognize the merits of the mincer.

The result of some experiments on the digestion of beef in the stomach have recently been reported in the *American Journal of Physiology*, which are very interesting and instructive. Very tough steaks from the cheaper and tougher cuts of meat, such as rump and shank, were more rapidly evacuated from the stomach than sirloin, or the best tenderloin steaks. Hamburger steak, which is lean, raw meat, finely chopped, left the stomach in about the same time as an equal weight of roast beef under the same conditions. Roast beef was treated by the stomach with the same ease, whether rare, medium or well done. The action of the stomach in regard to stewed beef is practically the same as with roast beef, only less acidity is developed. The response to boiled corned beef was similar to that of roast beef, or stewed beef. Dried beef, once considered particularly indigestible, was found to be digested with almost the same ease as roast beef. Tongue was slightly less digestible than roast beef.

In seventy experiments it was found that all normal stomachs do not respond alike to the entrance of the same food. Some respond very promptly, and others very slowly and indifferently to the same food. One type of stomach empties very quickly, another very slowly under the same conditions. It required an average time of from two hours and thirty-five minutes to three hours and twenty-five minutes in the different types. This should be remembered in feeding convalescent patients.

HAMBURG STEAKS

Mince finely half a pound of raw, lean beef; season with pepper, salt and a few drops of onion juice. Mould it into small, flat cakes, being careful not to squeeze the mass too compactly in shaping them, or the cakes will be solid. Have ready a hot frying-pan with a little butter

in the bottom, and cook them for a few minutes. If no onion juice ready prepared is at hand, cut an onion in two and rub the cut part round and round on a coarse grater.

MEAT BALLS

Hamburg steak may be prepared as in the above recipe; half an egg, slightly beaten, added to it, and the mixture rolled in tiny balls the size of marbles. Fry these in deep fat, allowing them to stay in only long enough to brown the surface. Serve a sufficient quantity on a leaf of lettuce. They may be rolled in fine breadcrumbs or cracker-crumbs before frying, if desired.

Tender meat comes from that part of the animal where the muscles have been little used and are fine-grained. It is not necessarily more nutritious than the tougher portions, which are often very juicy, as the active exercise to which they have been subjected has caused the juice to be drawn to them and flow more freely through them.

In these days, when meat is so expensive, the nurse should remember this, particularly when she is in a household where the means are limited, and give her patient the benefit of the knowledge. Roasting and broiling give a more delicious flavor than any other manner of cooking, but they cannot be successfully applied to the cheaper cuts of meat. Braising is a humble imitation, and may be done where circumstances permit the nurse to watch the cooking.

BRAISING

Braising is steaming meat in its own juices in the oven. A piece of the round, which would be tough if cooked as steak, can be prepared for the patient by braising so as to make an acceptable dish. Take a small, thick piece; brown it for a minute or two in a hot frying-pan, with a little butter, turning it quickly from side to side. Then place it in a covered dish with a small quantity of boiling water, an onion cut in pieces, a little celery and carrot (if it is liked), and cook until the meat is tender, at least two hours. The oven should not be too hot. Salt and pepper should be added carefully, as the palate is often sensitive in illness.

Happiness is incompatible with stagnation. A man must feel his expanding power lifting, tugging away at a lofty purpose, or he will miss the joy of living.

Napoleon was twenty-seven when he conquered Italy. Pitt, the man who sent Napoleon to St. Helena, was twenty-four. Shelley died at twenty-eight. Keats died at the age of twenty-six. And still some people will say that youth is no time for serious thought, for thoughtful planning, and for definite, effective training.

The World's Pulse

By ELIZABETH ROBINSON SCOVIL



QUEEN ELIZABETH'S GIFT TO DRAKE

A beautiful silver-gilt cup and cover, originally belonging to Sir Francis Drake, the victor of the Armada, was recently sold for \$19,000. It had lain for many years bricked up in the cellar of an old house in Cornwall. It is in the form of a terrestrial globe, delicately engraved with a map of the world as it was known in the 16th century. On the silver seas are engraved sailing ships, dolphins and whales.

PEACE STAMPS

The first special postage stamps commemorating the peace have been issued by Switzerland and Japan. The designs of the three Swiss are Peace extending an olive branch, a dying gladiator seeing a vision of the peace he helped to win, and, the third, two soldiers shaking hands on a battlefield. The Japanese design is a dove in different settings. The little republic of San Marino and Portugal are also preparing to issue special stamps.

EDITH CAVELL'S SACRIFICE

During the trial of Edith Cavell many interesting facts were disclosed. Mme. Botard, one of the witnesses, said: "The last time I saw poor Edith Cavell was on Monday night, Oct. 2nd, in the prison in Brussels. I tipped a German soldier ten francs to be allowed to say good-bye to her. She gave me several commissions in Brussels. It was not until three years afterwards that I could fulfill them. Then she kissed me good-bye and said, 'I am glad to give my life rather than any of my soldiers should have fallen into the hands of the Germans.' She was wonderfully brave, but a little nervous. We were only allowed two or three minutes together, as the soldier was afraid a German officer might come along."

THE REAL BETRAYER

Brand Whitlock, former American Minister at Brussels, states that Nessdelrod, a young Belgian of good family, was certainly the betrayer of Edith Cavell. He was in need of money, and for this denounced the organization to the German police. Louis Bride, another young Belgian, who wished to escape across the frontier, heard of Nessdelrod's act, enticed him to a deserted part of Brussels, and shot him. He was arrested by the Germans, court-martialed and shot.

BRITISH GIFT TO BELGIUM

Great Britain has given as a free gift to Belgium the most fertile part of German East Africa, the districts of Ruanda and Urundi. They have a population of more than three million natives. Ruanda adjoins the Belgian Congo. The whole of German East Africa was assigned to Great Britain by the Peace Conference as a mandatory of the League of Nations.

MOVING PICTURES ON A MOVING TRAIN

When the Prince of Wales was travelling towards Edmonton, moving pictures of the earlier part of his Canadian tour were shown in the dining car of the C. P. R. Royal train. A tablecloth was used as a screen and the camera was placed in the middle of the car. The scenes of the landing and reception at St. John, N. B., were first displayed and then those at Halifax.

AIRPLANE SERVICE

An airplane has flown from Paris to London in 110 minutes, carrying two passengers and parcels. This was at the rate of 130 miles an hour. The wind was blowing at a velocity of over 100 miles an hour.

FLYING-BOAT

A flying-boat of the Royal Air Force squadron, in a demonstration flight to the Scandinavian countries, flew 2,450 sea miles in a total flying time of 40 hours and 40 minutes. Exhibition and passenger-carrying flights were carried out in different places. The Queen of Norway went up twice as a passenger. The Scandinavians, as a seafaring people, were quick to see the merits of flying-boats.

THE MAGNABOX

During President Wilson's tour of the United States he was advised by his physician not to speak in the open air. At San Diego, California, a huge glass case was erected, holding more than 250 people. In this was installed a magnabox, a new invention which magnifies the voice of a speaker and carries it to a great distance. The thousands who thronged the big stadium outside heard distinctly every word that he uttered.

CANADIAN FLAGS

During the war the colors of various Canadian regiments were draped around the monument of General Wolfe in the north aisle of Westminster Abbey. These are being removed as each regiment claims its own to carry it back to Canada. It has been suggested that replicas of these flags should be presented to the Abbey, to remain in place as a perpetual memorial of Canada's part in the great struggle.

Hospitals and Nurses



NEW BRUNSWICK

Miss H. J. Blanch has accepted the position of assistant superintendent of nurses of the St. John General Public Hospital, which position has been left vacant by the resignation of Miss Annie Day.

Miss Marion MacLachlan has accepted the position of head nurse in the General Public Hospital, St. John, N. B.

The annual meeting of the St. John Local Chapter of the New Brunswick Association of Graduate Nurses was held at the General Public Hospital October 20th, 1919. The following officers were elected: Chairman, Miss Ada Burns; secretary, Miss Ella McCaffigan; treasurer and registrar, Miss Martha Fraser. It was decided to have social evenings during the winter, to be held at the residences of the different members.

Miss Ada Burns, vice-president of the New Brunswick Association of Graduate Nurses, is convalescing at her home in St. John, N. B., after undergoing a serious operation at the General Public Hospital.

Nursing Sisters Mary Barnhill and Elizabeth Brittain, who returned from overseas a short time ago, left for Victoria, B. C., October 23rd, 1919.

Mrs. E. B. Rainnie (G. P. H.) has accepted a position at the St. John County Hospital.

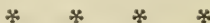
Miss Horseman, after two years' service at the County Hospital, East St. John, has resigned from her position.

Nursing Sister Edna Duthie (G. P. H.), who returned from overseas a short time ago, is taking a post-graduate course at Corey Hill, Boston, Mass.

Nursing Sister Pearl Fox (G. P. H.) has recently returned from overseas.

Nursing Sister Margaret E. Davis (G. P. H.), who returned from overseas some little time ago, is convalescing in Halifax Military Hospital, after undergoing an operation.

The second provincial registration examinations were held in St. John October 15th and 16th. Sixteen candidates took the examination.



NOVA SCOTIA

HALIFAX

The Nova Scotia Graduate Nurses' Association held last month at the Green Lantern the most successful function which they have ever held, and that is saying much, with pleasant memories of other "parties," although to the members of the nursing profession parties are necessarily

few and far between, so insistent is the call of professional duty. To this banquet all the nurses who served overseas were invited, and the party at table was a large one, Mrs. Elizabeth Doyle (Nursing Sister Doyle, of Camp Hill Hospital) presiding with grace. To the evening's programme Miss Ella Courtney contributed some delightful songs, which were enthusiastically received, and when justice had been done to the material feast, there came the toasts, which brought forth some fine impromptu speeches.

There followed an address by Miss Kilrairie, now in charge of the Tuberculosis Clinic, whose theme was "Public Health Nursing." Of the address, it may be said that it was without doubt one of the strongest and most effective on that subject, important as it is, which has been heard here in a long time, and well worth a hearing by the largest audience procurable.

At its conclusion Miss K. Graham moved a vote of thanks, in the course of her speech making special reference to Matron-in-Chief MacDonald, who is a Nova Scotian, and whose efficiency in her responsible post was signal.

The singing of "Auld Lang Syne" and the National Anthem brought the most enjoyable evening to a close.

In the afternoon, at the Y.M.C.A. Hall, the annual meeting of the association was held, the reports all being in a high degree encouraging, and Mrs. W. D. Forrest, honorary president, being in the chair.

The report of Miss Pemberton, of the National Convention in Vancouver, was very fine and was heard with interested attention from its first word to its last.

The following officers were elected: President, Nursing Sister Doyle; vice-president, Miss Pickles, superintendent of nurses, V. G. H.; secretary, Miss Dora Burgoyne; treasurer, Nursing Sister Frances Rice; executive, Mrs. H. Hall, Nursing Sister Dempsey, Mrs. H. McLarren, Mrs. Barnfather, Miss Winnie Read and Miss Luxon.

* * * *

QUEBEC

The opening meeting of the Graduate Nurses' Association of the Eastern Townships was held at the home of the president, Mrs. MacKinnon, Sherbrooke, Que., on Thursday, September 18th. It was moved and carried that the sum of five dollars be granted the Victorian Order of Nurses to assist them in their campaign.

A tea was also arranged for Mrs. Gordon, superintendent of the Sherbrooke Hospital, and her assistant, Miss Kennedy, both having resigned from the hospital, leaving on October 1st.

It was moved and carried that Nursing Sister M. Ewing, lately returned from overseas, be made an honorary member of the association.

Refreshments were served, and the meeting closed.

Nursing Sister Edna Day, who, before enlisting, was assistant superintendent of the Sherbrooke Hospital, returned this summer from overseas, and has been visiting friends in Sherbrooke. Later, Miss Day intends taking up her work with the Soldiers' Civil Re-establishment in Montreal.

Nursing Sisters Dora Jones and Van visited Sherbrooke on their return from overseas.

Miss E. M. Stewart, graduate of the Sherbrooke Hospital, who served overseas, returned this summer. Miss Stewart left for Vancouver, where she intends taking up Soldiers' Civil Re-establishment work.

Miss Hetherington, secretary of the association, is away on her holidays.

Miss Frances J. Lewis, recently graduated from the Jeffery Hale's Hospital, has returned to her home in Louisburg, Cape Breton, where she intends remaining until the New Year.

Miss Una H. Gale, J. H. H., '12, has accepted a position as school nurse in Quebec City.

Miss Jean Wilson, superintendent of the Moose Jaw Hospital, spent a few days in Quebec visiting friends last month.

Mrs. Dr. MacIver, J. H. H., '11, spent a few days in Quebec City last month.

Miss Rhoda Perry, who has been nursing in New York the past year, spent a short vacation at her home in Quebec.

Among Quebec's recently returned nursing sisters are: Charlotte Kennedy, Elsie Walsh and Emily Lenfesty, of Percy, P. Q.

R. V. H. ALUMNAE NOTES

Miss Imogen Pearson has left for El Paso, Texas, where she expects to remain for the winter.

Miss Harriet Drake (1907) is taking a course at Teachers' College, Columbia, N. Y.

Miss G. Prescott, a recent graduate of the class of 1918, is in charge of Ward M, R. V. H.

Miss F. Munroe, recently returned from Taplow, is in charge of the fourth floor, Ross.

Mrs. Maud Austin (1912), after four years in France with No. 3 McGill, returned early in the summer, going to Vancouver after spending a short time with friends in Montreal, and has now left for Barbadoes on an extended visit with her people there.

Dr. and Mrs. J. O. Hamilton (Sara Chisholm) and two daughters left their former home in Scotland and are now settled in Avonleigh, Acadia Road, Torquay, Devon, England.

Mrs. C. Hamilton (Miss E. LeMay, 1904), of Roseburg, Oregon, was a recent visitor in Montreal.

Miss S. Orr, who has been in charge of the fourth floor, Ross, expects to leave shortly with a patient to spend the winter in California.

Miss Constance Anderson, who has been ill for the past year, has returned to Montreal, and is doing special nursing.

Mrs. H. Gray Massiah (Enid Leger), and children, after spending the summer in Montreal and Woodlands with her people, have returned to their home in Folkestone, St. James, Barbadoes.

Mrs. Coleman (Margaret Campbell, 1909) and little son called, en route to New Philadelphia, Ohio, from a field barrack, Hawaii.

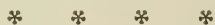
Miss Muriel Boulden (1916) has taken the position of assistant nurse at Macdonald College, St. Anne de Bellevue.

Miss Margaret McIntosh, recently returned from France, is at present the guest of her brother at 7 Chalmers Place, Chicago, Ill.

Miss Mima Russell (1896), for the past three years assistant to Miss R. Stewart at Macdonald College, is now assistant director of school nursing in Saskatchewan, with headquarters at Regina, care of Miss Jean Brown, director of school hygiene, Regina, Sask. Miss Russell is very enthusiastic over this important branch of nursing as carried out in the West.

A most successful meeting marked the opening of the year for the Alumnae Association. A large number were present, amongst whom were many recently returned nursing sisters, recent graduates and prospective alumnae workers. Miss Goodhue was unanimously re-elected president for the coming year, all the other members of the staff being returned to office.

Miss M. Clint is in Vancouver with a military transport.



ONTARIO

Dr. C. A. Rae is to be the house physician at the Isolation Hospital, Toronto, and Dr. Eric Clarke is to be in charge of the psychiatric work in the public schools. The board of control has approved of these appointments.

At a meeting of the Toronto General Hospital Board of Directors on October 8th, Mr. C. J. Decker was appointed superintendent of the hospital, to succeed Mr. H. L. Brittain, the former superintendent, who has retired. Mr. Decker had served as superintendent under Mr. Brittain.

TORONTO FREE HOSPITAL, WESTON

August 31st. The medical staff and graduates were entertained at high tea by the lady superintendent, in honor of the return of Nursing Sisters Edith Jones, Jean Bryden and Edith Alway from overseas. After tea a pleasant social evening was spent.

The first meeting of the Alumnae Association for the year was held on the first Friday in September. There was a large attendance and four new members were accepted. A very instructive address was given by Miss E. M. P. Dickson on "Parliamentary Procedure."

THE HOSPITAL FOR SICK CHILDREN, TORONTO

Miss E. J. Jamieson, graduate of the Hospital for Sick Children, Toronto, has been appointed president of the Graduate Nurses' Association of Ontario.

Miss Mabel McNeel, a graduate of the Hospital for Sick Children, Toronto, has recently accepted the position of superintendent of the Winnipeg Children's Hospital and Training School.

It is with pleasure and a keen sense of pride that we report an interesting experiment which was tried out this summer in Toronto. The Department of Education, at the Medical Building of our University, established an ideal course for the school nurses of the province. Thirty young women from various districts and cities of Ontario were enrolled, and had as their objective the making of some standard and uniform system of keeping up the health record of all the schools throughout the province. Special lectures were given daily by the best local doctors on psychology, psychiatry, nose, throat and eye conditions, defective vision and dentistry as applied to the school. Round-table talks were held later in the day by the nurses, who discussed new methods for reaching the young children in the home, who are frequently in need of attention before they commence school. The keen interest taken by those in attendance so encouraged the board of education that we hope the experiment may become a fixture.

BRANTFORD

On the afternoon of Wednesday, September 24th, in the assembly room of the nurses' residence, a large gathering witnessed the graduation exercises in connection with the B. G. H. Training School. Perfect weather helped to make this delightful occasion one to be long remembered. The address to the graduating class was read by Dr. Gamble. Diplomas and pins were presented to eleven nurses, also silver thermometers, the usual gift to each graduate from the Woman's Hospital Aid. The Dr. Bier Scholarship for the nurse attaining the highest class standing was awarded to Miss Caroline Good, of Brantford. Miss Edith Jones came so near to the high mark that she was also given a prize by Dr. Bier, Miss Good receiving fifteen dollars in gold and Miss Jones a sovereign. Magnificent flowers added to the beauty and pleasure in connection with this event. Those graduating were: Miss Sara Livett, of Galt; Miss Maude Saunders, Owen Sound; Miss Beatrice Jennings, Brantford; Miss Helene Baird, Galt; Miss Georgia Leslie, Owen Sound; Miss Eva Kenyon, Brantford; Miss Hope Doeringer, Brantford; Miss Edith Jones, Brantford; Miss Lavina Gillespie, Erin, Ont.; Miss Caroline Good, Brantford; Miss Gertrude Shaver, Islington, Ont.

At 8 p.m. the Alumnæ Association tendered a banquet to the graduating class at the Patricia Cafe. Later in the evening men friends were received, cards and dancing indulged in, and such an enjoyable time spent that the association intend making the banquet an annual affair.

The annual meeting of the Alumnae Association was held on the afternoon of Thursday, September 25th. An important feature in connection with this meeting was the reception into membership of the eleven new graduates. The annual reports show a very successful past year. Arrangements are being made for the annual bazaar, which will be held late in November. After the election of officers, refreshments were served, and the meeting brought to a close.

Miss Marguerite Kerr, class 1916, who recently returned to her home in Owen Sound after three years' service overseas, was present at the graduating exercises and annual meeting.

Miss Pearl Robinson, who resigned her position as operating-room supervisor in May, has returned to the city to do private duty after an extended holiday.

It is expected that the addition to the nurses' residence will be completed and opened within a few weeks' time.

Miss M. Forde, superintendent of the B. G. H., is holidaying at Atlantic City.

The regular monthly meeting of the Thunder Bay G. N. A. was held at the McKellar Hospital Nurses' Home on Thursday, October 2nd, at which meeting the programme for the year was arranged. Two of the old members, Misses Hamm and Gallagher, were welcomed back from overseas service. There was a good attendance at the meeting. Refreshments were served and a social hour enjoyed.

HAMILTON GENERAL HOSPITAL

Miss Reynolds has retired from the Grant Avenue Hospital, and, after a trip to New York, will resume private nursing in Hamilton.

Misses Wilkin and Emerson have gone to Vancouver, B. C.

Miss A. Carscallen is home from overseas, and expects to leave for California before long.

Misses Ghent and Currie have gone to Rochester, Minn., to nurse in St. Mary's Hospital (Dr. Mayo's).

Miss Fellowes has gone to Africa to take up work as a medical missionary.

Miss Mather is in Cincinnati, taking a course to qualify her as medical missionary.

* * * *

MANITOBA

BRANDON

Brandon was honored by a visit from the Prince of Wales on October 10th, on which occasion Nursing Sister Johnson was decorated and Nursing Sister Morrison, Miss Birtles and Miss M. McLeod presented.

The Brandon association has instituted a home nursing class for V. A. D's at the General Hospital, which is well attended. In the event

of their services being required this winter, the V. A. D's will work under the supervision of graduates of the hospital.

The Brandon association entertained the returned nursing sisters at the home of Mrs. J. Pierce. An address was presented to the guests of honor by Miss Margaret Gemmell, Miss S. P. Johnson replying on their behalf. A most enjoyable evening was spent by all who were present.

A very pretty wedding was solemnized at one o'clock in the First Baptist Church, when Miss Ruby Stent, of Brandon, daughter of Mr. and Mrs. F. J. Stent, of Carlyle, Sask., was united in marriage with Rev. Henry Tilton Wright, of Winnipeg, son of Mr. and Mrs. H. A. Wright, of Liverpool, Nova Scotia. Rev. M. L. Orchard performed the ceremony, assisted by Rev. Britton Ross, of Winnipeg.

The bride entered the church, leaning on the arm of her father, to the strains of the Bridal Chorus from "Lohengrin," played by Mr. Butler, organist of the First Baptist Church. During the signing of the register Dr. Bolton sang, "O Promise Me."

The bride was becomingly gowned in a handsome gown of champagne taffeta silk, with touches of georgette of the same shade. Her hat was champagne crepe de chene trimmed with burnt orange velvet. She carried a shower bouquet of blush roses.

Following the ceremony, a buffet luncheon was served at the Nurses' Home of the Brandon General Hospital. The living-room was attractively decorated with cut-flowers and ferns. The wedding cake centred the tea table, which was presided over by Miss Birtles and Mrs. James Hatcher. The staff nurses of the hospital assisted in serving the guests.

The newly married couple left on the afternoon train for Winnipeg, where they will reside.

The bride travelled in a navy blue serge suit trimmed with military braid, the coat opening over a daintily embroidered blouse of white pussy-willow taffeta. She wore a smart hat in elephant shade, simply adorned with wings of the same color.

The out-of-town guests included Mr. and Mrs. F. J. Stent and Miss Nellie Stent, of Carlyle, Sask.; Mrs. Arthur Hill, of Estevan, Sask., and Rev. Britton Ross, of Winnipeg.

Both bride and groom are very well known in Brandon. Mrs. Wright graduated at the Brandon General Hospital.

WINNIPEG

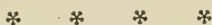
In the death of Nursing Sister (Captain) Elizabeth Thomas, of 31 Smith Street, the last of the fourteen nursing sisters who went overseas in 1914 in connection with the British Red Cross passed away. Nursing Sister Thomas was buried yesterday afternoon, with full military honors, in Norway Cemetery, from St. Clement's Anglican Church, Jones Avenue, where Rev. John Bushell conducted the services. Twenty-five members of the Riverdale Branch, G. W. V. A., attended, and the firing party consisted of 75 men from the Dragoons and the Garrison Band.

Six members of the P. P. C. L. I. carried the flag-draped casket from the church to the gun carriage. On it her nurse's service cap, with its flowing veil, was placed. The service at the grave was conducted by Canon (Major) H. C. Dixon.

Those who acted as pallbearers have all won decorations on the field, and two of them have but one arm. They were: Sergt.-Major Shaw, Sergt.-Major Young, Sergts. Hill, Bonner, Vonaughton and Wassill.

Three Florence Nightingale nurses and three army nursing sisters were honorary pallbearers.

Among the beautiful floral tributes were a basket of yellow chrysanthemums from the Sisterhood Florence Nightingale Order, whose medal she had won, and pieces from the G. W. V. A. of Moose Jaw, the Riverdale G. W. V. A., Ladies' Auxiliary of the G. W. V. A., the "Original" P. P. C. L. I. Club, Ladies' Auxiliary of the P. P. C. L. I., the Regimental Club of the P. P. C. L. I., and a pillow with the Red Cross emblazoned in scarlet flowers.



ALBERTA

The officers and boards of the various Alberta hospitals were called together to form a Hospitals Association, and met in Edmonton, October 22nd and 23rd, at the University of Alberta. Rev. Mr. Murrell-Wright, of Lethbridge, was appointed chairman, with Dr. Fyshe, superintendent of the Royal Alexandra Hospital, as secretary. The invocatory prayer was made by the Rev. D. C. McQueen, and addresses of welcome were given by the Mayor of Edmonton and Mr. John A. McDougall, president of the Edmonton Hospital Board.

The opening convention address was made by Dr. J. C. Fyshe, who presented the aim of the meeting and the beneficial results they hoped to get by the meeting in convention of all interested in hospital matters.

The following programme was followed out:

WEDNESDAY, OCTOBER 22ND, 1919

10 A.M.

Prayer—By Rev. Dr. D. G. McQueen.

Addresses of Welcome—By His Honor the Lieutenant-Governor of the Province of Alberta; His Worship the Mayor of Edmonton; John A. McDougall, Esq., President of the Edmonton Hospital Board.

Convention Address—Dr. J. C. Fyshe, Superintendent of the Edmonton Hospital Board.

Address—"The Future Hospital Field."—Dr. A. Fisher, Superintendent of the Calgary General Hospital.

Address—"The Work of the S. C. R. in the Establishment of Syphilis Clinics in Alberta."—Dr. R. T. Washburn, Officer in Charge S. C. R. Hospital, Strathcona.

Address—"The Hospital Deficit in the Light of Community Service."—

Dr. D. G. Revell, University of Alberta.

Address—"The Eight-Hour Day for Nurses."—Miss L. M. Edy, R.N.,
Calgary General Hospital.

3 P.M.

Demonstration and Lecture—By G. V. VanTausk, Esq., District Vocational Officer, S. C. R., Calgary.

Address—"State Control of Nurses Trained in Hospitals in Receipt of Government Grant."—Mrs. Nat. Edwards.

Address—"Child Welfare."—Miss F. J. Scarry, Victorian Order of Nurses.

Round Table Conference.—Conducted by Miss F. MacMillan, R.N.,
Royal Alexandra Hospital.

8 P.M.

First Presbyterian Church

Public Meeting.

Community Service.

The Workmen's Compensation Act Explained—J. A. Kinney, Esq.

The Municipal Hospitals Act Explained.—Dr. W. C. Laidlaw.

Address—"The Need for Special Hospital Accommodation for the Aged and Tuberculous and the Care of the Destitute Poor in the Community."—Dr. T. H. Whitelaw, Medical Officer of Health, Edmonton.

Address—"The Practical Way in Which the Red Cross Aims at the Solution of the Health Problems in the Province."—Mrs. C. B. Waagen, Hon. Secretary of the Red Cross Society, Alberta Provincial Branch.

Address—"The Relation of Hospital to State."—By Dr. G. W. Stanley, M. L. A., Calgary.

Address—"Relation of State to Hospital: The Government Grant."—The Rev. J. E. Murrell-Wright, Lethbridge.

Address—"A Short History of Hospital Development with Lantern Slides."—Dr. H. C. Jamieson, the University of Alberta.

THURSDAY, OCTOBER 23RD, 1919

10 A.M.

Address—"Dietetics."—Miss Wadleigh, R.N., Calgary General Hospital.

Address—"Management of the Hospital Dietary."—Sister Duckette, R.N., Holy Cross Hospital, Calgary.

Address—"The Hospital's organizations from the Nurses' Viewpoint."—Miss Helen Randal, R.N., British Columbia.

Address—"Standardization of Case Reporting."—Dr. W. W. Upton, Calgary.

Address—"Medical Works of S. C. R. in Relation to the Hospital Situation in the Province."—Major Geo. R. Johnson, Calgary.

Address—"The Function of a Small Hospital in the Community."—Dr. A. E. Archer, Lamont.

12 NOON

Address—"University Influence in Hospital Development."—The President, University of Alberta.

Address—"Teaching Problems."—Miss Rutherford, R. N., Calgary.

Address—"Ward Supervisors and the Ward Assistant."—Miss Lougheed, R. N., Calgary.

Address—"What Can Be Done to Meet the Shortage of Nurses."—Miss MacDonald, R. N., Calgary.

Organization and Election of Officers.

Luncheons were given at the University of Alberta, by the University; at the Macdonald Hotel, by the Board of the Edmonton Hospital; and tea at the Royal Alexandra Hospital.

Rev. Mr. Murrell-Wright was elected first president of the Alberta Hospital Association, and Dr. Fyshe secretary.

It was decided to hold the next meeting in Calgary.

LETHBRIDGE

On June 12th, 1919, a meeting was held at the Nurses' Home, Lethbridge, to organize a Graduate Nurses' Association. The following officers were elected: President, Miss E. A. McClarty, R. N., superintendent Galt Hospital; vice-president, Miss Jean McKenzie, R. N.; secretary-treasurer, Miss M. Hamilton, R. N.; executive committee, Miss Johnson, Miss Newman, R. N., and Miss Hill.

* * * *

BRITISH COLUMBIA

VANCOUVER

The wedding took place on Thursday, at 11 a.m., of Nursing Sister Annie E. Jones, daughter of Mrs. E. Jones, to Lieut. Thomas Taylor, of the Australian Imperial Forces, Third Tunneling Co. The ceremony took place at Christ Church, Rev. M. H. Jackson officiating. The bride, who was given away by Dr. Naboth Allen, was attended by her sister, Miss Gertie Jones, and Mrs. Allen. Mr. and Mrs. Taylor intend leaving for Australia early in October.

Miss M. B. Harvie and Miss J. E. Galbraith have gone up to Kamloops to join the nursing staff at Tranquille Sanitarium.

Nursing Sister Carrie M. Robson, daughter of Mr. and Mrs. C. J. Robson, St. George Street, arrived from the East a few days ago, where she has been visiting her brother, Dr. Harold Robson, and their relatives since her return from overseas. Sister Robson has been serving in England and France since early in 1917, and has many vivid and interesting stories to tell of her experiences.

Rev. Dr. and Mrs. J. Knox Wright announce the marriage of their daughter, Edith Helen, to Mr. Bryce H. Wallace on Friday, September 12th, 1919, at 3349 Third Avenue, West, Vancouver, B. C.

Miss Irene Clark, who has been visiting Rev. and Mrs. H. S. Bagnall in Nelson, B. C., for some time, was married on Wednesday, September 10th, to Mr. Esle Miller, of Vancouver.

On Wednesday evening, November 5th, Miss L. Archibald, of the Nurses' Club and Registry, entertained the Vancouver Graduate Nurses' Association at her home, 779 Bute Street.

The evening was spent at cards (nine tables), the prize being won by Miss Adele Cooper. After the card-playing, refreshments were served in the dining-room from a daintily-appointed table in pink and white color scheme. Assisting the Misses Archibald were Miss Norma Walker and Miss Hart, while Mrs. M. E. Johnson and Miss Cosae Haskin poured tea. A number of returned overseas nurses were present and welcomed back.

This social evening took the place of the regular monthly meeting, all business being left over until the next meeting, December 3rd.

Nursing Sister Effie L. Craig, C. A. M. C., a graduate of the Vancouver General Hospital, returned to the city recently after a period of over five years overseas, during which time she served in France and England with the Queen Alexandra Nursing Service, later transferring to the Canadians. Nursing Sister Craig went overseas in 1914 from Honolulu. For a short time she is the guest of Mrs. F. W. Holloway, 2396 Second Avenue, West.

Nursing Sister B. H. Bennett, who left for overseas in 1916, has returned to the city. Sister Bennett has been on active service in England, France and Germany, and was on duty at Etaples during the bombing raids on the hospitals in that area. For the past few months she has been on duty at the Canadian Officers' Hospital, Hotel Petrograd, London, England, where her brother, Lieut.-Col. A. E. H. Bennett, was the officer commanding. Col. Bennett is expected in the city very shortly.

A report received from the Tranquille Sanatorium for the month of September indicates that twenty-eight patients have been admitted during that period. They are classified as follows: Far advanced, eight; moderately advanced, nine; incipient, nine, and non-tubercular, two. Fourteen patients were discharged during the month. Of these, three were classed as apparently arrested, four quiescent, and seven improved. The total number of days' treatment for September was 3,988, and the total number of patients in residence was 155.

ESQUIMALT

Probably one of the most interesting and impressive services ever held in the historic St. Paul's Church, Esquimalt, was that held on Sunday evening, October 19th, when Colonel the Rev. G. H. Andrews, rector of St. Mary's, Oak Bay, unveiled a memorial brass to the late Nursing Sister Gladys Wake, of the C. A. M. C.

Every seat in the church was filled, representatives of the various soldier and nurses' organizations being much in evidence. In order to accommodate all those who came to pay tribute to the memory of their

sister and comrade, many had to be seated in the chancel and on chairs placed at the back of the church.

The service opened with the hymn; "Come Ye Disconsolate," followed by the Psalms appointed for the day and the special lesson, read by Messrs. Day and Booth, respectively, both of whom saw service in France. Then followed the singing of the 39th Psalm from the Burial Service, and the actual unveiling of the memorial tablet, which is placed on the north side of the church, beside other tablets in memory of the Wake family.

During the course of his sermon, Colonel Andrews drew a vivid word-picture, based upon his personal experience and actual observation, of the work and unfailing devotion to duty of that gallant band of nursing sisters who cheerfully braved privation, toil, sickness and death itself in order that they might minister to, and mitigate in some degree, the sufferings of the wounded and dying.

At the close of the service, immediately before the Benediction, the Rev. W. Baugh-Allen, rector of St. Paul's, spoke a few words of welcome to the returned men and nursing sisters in the congregation. "Too often," he said, "our services in the past have been one of farewell to those about to depart for the battlefields of Europe. Now it is my privilege and pleasure to welcome you home, and I do so most thankfully and sincerely."

One of the outstanding, although unrehearsed, parts of the service was the singing of the hymn, "God Be With You Till We Meet Again," which was sung in addition to the offertory hymn. The vast congregation took up the well-known tune, and, led by the choir, sang it with such evident devotion and sincerity as to leave a lasting impression of the occasion upon all who were present.

The Benediction was pronounced by the Rev. W. Baugh-Allen, and the service brought to a close by the singing of the National Anthem.

The musical portions of the service were rendered with much feeling and devotion, the choir being heard to considerable advantage in Woodward's anthem, "The Sun Shall Be No More Thy Light by Day." Mr. W. Ellis gave a thoughtful and finished rendering of Gladys Melrose's beautiful song, "Wings of Night." The church organist, Mr. T. R. Myers, presided at the organ.

BIRTHS

BRODIE—At the St. John Maternity Hospital, October 23rd, to Mr. and Mrs. F. Neil Brodie, a daughter, Dorothy Elizabeth.

GOODFELLOW—On August 20th, 1919, at 367 Peel Street, Montreal, to Mr. and Mrs. Geo. C. Goodfellow, a son. (Mrs. Goodfellow was formerly Miss Carnie Jones, 1907.)

ORR—To Dr. and Mrs. Orr (nee Lena Anderson, M. G. H., '11), at Montreal Maternity Hospital, in August, a son.

McKAY—To Rev. and Mrs. Wm. McKay (nee Miss Mildred Akerley), at Marble Mountain, Cape Breton, on October 13th, a son, Donald Akerley.

ROBERTS—On Thursday, October 16th, 1919, at the City Hospital, to Dr. and Mrs. James Roberts, twin sons. Mrs. Roberts was formerly Miss McBeth, H. G. H., class 1915.

MARRIAGES

BRADSHAW-DUDER—At Montreal, October 27th, 1919, Frederick Lodge Bradshaw to Mary Mildred C. Duder. Mr. and Mrs. Bradshaw will live at 41 Military Road, St. John's, Newfoundland.

BRITTON-NIEL—At Moncton, N. B., September 25th, 1919, Alice Niel (1918) to Dr. Harry Earle Britton, of St. Anne de Bellevue Military Hospital.

CHALMERS-CANNING—At St. John, N. B., September, 1919, Nursing Sister Loretta Canning, graduate of St. John General Public Hospital, to H. Chalmers, of Bathurst, N. B.

CUNNINGHAM-HARRIS — At High Park Presbyterian Church, Toronto, September 23rd, 1919, by Rev. Mr. Turnbull, Lillian Rae, daughter of Mr. and Mrs. Thomas Harris, Toronto, to James Cunningham, son of Rev. R. Cunningham, Welland, Ontario. Miss Harris is a graduate of the Hospital for Sick Children, Toronto, class 1915.

GOOD-HUMPHREYS—At Quebec, June 21st, 1919, Miss Gladys Humphreys (J. H. H., '17) to Mr. A. Good, of England.

GORHAM-BAIN—At St. Andrew's Church, Quebec, May 15th, 1919, Miss Margaret Bain, of Bridgewater, N. S. (J. H. H., '17), to Mr. Cyrille Hebert Gorham.

GRIFFITH-WHITE—At Montreal, on September 6th, 1919, Eleanor A. White, M.G.H., to Mr. David Griffith, of Montreal.

GRILLS-TINCK—On Saturday, September 6th, at Toronto, Bessie Tinck, graduate of the B. G. H., class 1916, daughter of Mr. and Mrs. Robert Tinck, Regina, Sask., to William Grills, of Galt, Ont.

Longbridge-McNAUGHTON—At the Grand Riva parsonage, August 12th, Alice Longbridge to Ashton McNaughton, eldest son of Mr. James McNaughton, of Brantford. Miss Longbridge is a member of the 1918 class.

MERCER-DAY—At Oxford, N. S., October 2nd, Annie Day, graduate of the St. John General Public Hospital, to Henry Mercer, of Montreal.

MILLARD-McCULLOCH—On Wednesday, September 10th, at St. Catharines, Ont., Anna McCulloch, graduate of B. G. H., class 1913, daughter of Mr. and Mrs. Thomas McCulloch, St. Catharines, to Reginald Millard, of Brantford, Ont.

NAYLOR-BUFTON—On Thursday, July 17th, 1919, Miss Annie Louise Bufton, class '03, L. S. I., Ottawa, Ontario, to Mr. Richard Naylor, Rev. Mr. Hooper, of North Vancouver, officiating.

ODLAND-FISHER—At Chatham, N. B., October 8th, 1919, Alice Chapman Fisher to Dr. Henry Odland. They will reside at 615 Fifth Avenue, S. E., Minneapolis, Minn.

REDDICK-ANDERSON—At St. Paul's Church, Toronto, on September 17th, by Rev. Lawrence Skey, of St. Anne's Church, Ivy F. Anderson to Dr. J. W. Reddick. Miss Anderson is a graduate of the Hospital for Sick Children, Toronto, class 1915.

TAYLOR-BALLANTYNE—At 19 Thornton Avenue, London, Ontario, on September 1st, 1919, by the Rev. F. Ballantyne, Ada, daughter of Rev. W. D. Ballantyne, of Los Angeles, California, to William Dunbar Taylor, of Toronto. Miss Ballantyne is a graduate of the Hospital for Sick Children, Toronto, class 1907.

THOMSON-MCKENZIE—At Lethbridge, Alberta, on August 27th, 1919, Miss Mae McKenzie, graduate of the Galt Hospital, Lethbridge (1918), to Capt. J. E. Thomson. Captain and Mrs. Thomson will reside in Lethbridge.

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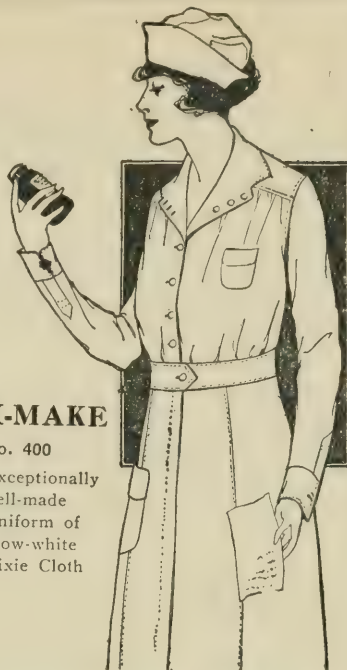
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THE STANDARDIZATION OF RURAL HOSPITALS

Dr. Isaac S. Stone, of Washington, D. C., is in favor of bringing the standard of all hospitals, whether large or small, up to that point which would afford the best service to the public and which would require the best medical and surgical training of the staff. Sufficient information had been collected to show the number of poorly-equipped hospitals in perhaps all parts of the country in towns and rural districts. Many of these were but little better than boarding houses, without the essential equipment of house staff or laboratory, or indeed anything which justified the name of hospital. It was suggested that all hospitals should be inspected by the health officer or commissioner of health, whether they were public or private institutions, and in case they were found up to the standard of requirement they should be duly licensed and required to send in a full report of the treatment of all cases during each year. The writer also favored State aid to rural hospitals when necessary, to provide hospital relief in country or remote outlying districts. Especial attention was given to consideration of rural hospitals as social service centres and for the care of obstetrical patients whose homes were remotely situated or who were unable to obtain competent professional attendance.

—*West Virginia Medical Journal.*

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Regular Monthly Meeting—Third Tuesday, 8 p.m.

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"Canadian Nurse" Representative—Miss E. Morris.

Regular meeting, 1st Friday of every second month, from May to June, 4 p. m.

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Regular Meeting—Second Friday.

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Regular monthly meeting first Thursday at 8 p.m.

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The Association meets in the Nurses' Residence the first Wednesday in October; then the first Wednesday of each alternate month for the season.

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Regular Meeting—Fourth Thursday of each alternate month at 3 p.m.

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Regular Meeting—First Tuesday, 4 p.m.

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Regular Meeting—Second Wednesday, 8 p.m.

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Social—Miss Starr, 753 Wolseley Avenue.

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Red Cross—Mrs. Hall, 237 Morley Avenue.

Regular Monthly Meeting, second Wednesday at 3 p.m.

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